

L19000063907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

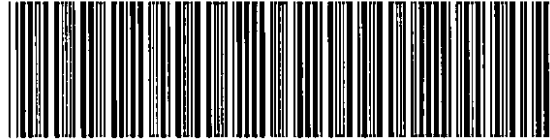
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEC 22 2020

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 12/21/2020

PRIORITY Routine

OUR REF # (Order ID#) 879169

ORDER ENTITY

EA MARKETING GROUP OF TAMPA, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

EA MARKETING GROUP OF TAMPA, LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

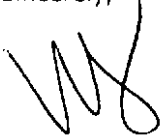
RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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EA MARKETING GROUP OF TAMPA, LLC :

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on March 6, 2019 and assigned
Florida document number 1.19000063907

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
TRES	Victoria Wilson	2480 N Heritage Oaks Path HERNANDO, FL 34442	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	3 Colbies Inc	1336 Seven Springs Blvd New Port Richey, FL 34655	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Amrut6 LLC	7333 52nd Place East Bradenton, FL 34203	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Another Patel Project LLC	1435 E. Venice Ave, Suite 103 Venice, FL 34292	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Brosis Ventures, Inc.	Shoppes at Lithia, 3455 Lithia Pinecrest Road Valrico, FL 33596	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
AMBR	Denlau Corporation	4060 US Highway 19 North Pinellas Park, FL 33781	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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AMBR = Authorized Member

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SECRETARY OF STATE
3749 Bruce B. Downs Blvd, FL
Tampa, FL 33613

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	DILSE, LLC	3749 Bruce B. Downs Blvd, FL Tampa, FL 33613	<input checked="" type="checkbox"/> Add
		Wesley Chapel, FL 33544	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Friedman-Tollberg Corp.	1305 S Dale Mabry Tampa, FL 33629	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JIGNA3 LLC	1100 N Tuttle Avenue Suite 15 Sarasota, FL 34237	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Lauden Corporation	4827 34th St South St. Petersburg, FL 33711	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LD Fruit Corporation	806 Court Street Clearwater, FL 33756	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Revels Brothers Enterprises Inc.	4802 South Florida Avenue Lakeland, FL 33813	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	RG Projects, Inc.	2718 E Fowler Ave	<input checked="" type="checkbox"/> Add
		Tampa, FL 33612	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Rienis Corporation	33139 US Highway 19 N	<input checked="" type="checkbox"/> Add
		Palm Harbor, FL 34684	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RM Slever Enterprises Inc.	420 Citi Centre St	<input checked="" type="checkbox"/> Add
		Winter Haven, FL 33880	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RW Enterprises LLC 352	2711 Forest Road	<input checked="" type="checkbox"/> Add
		Spring Hill, FL 34606	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	V Wilson Enterprises LLC	2480 N. Heritage Oaks Path	<input checked="" type="checkbox"/> Add
		Hernando, FL 34442	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Vitabo, LLC	14308-B North Dale Mabry Highway	<input checked="" type="checkbox"/> Add
		Tampa, FL 33618	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

MGR = Manager
AMBR = Authorized Member

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AMBR = Authorized Member

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Title	Name	Address	Type of Action
AMBR	SISBRO Ventures Inc	10273-Big Bend Road Riverview Bell Plaza Riverview, FL 33578	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Dennis Jolicocur	33139 US Highway 19 N Palm Harbor, FL 34684	<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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SECRETARY OF STATE

TALLAHASSEE, FL

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated December 16, 2020

Dennis Jolicœur

Signature of a member or authorized representative of a member

Dennis Jolicœur

Typed or printed name of signer

Filing Fee: \$25.00